

## Key Points

- Resurgence of cholera outbreak reported.
- 480,000 households to receive agricultural input support.
- 1.3 million rural Zimbabweans expected to be food insecure during peak hunger season.

## I. Situation Overview

Humanitarian needs in Zimbabwe are still large and substantial. Despite a significant improvement compared to 2008/9, little has happened to consolidate the gains and the situation remains fragile and uncertain. Consequently, the country remains vulnerable to the impact of unseen new emergencies.

As a result, agencies in Zimbabwe need \$478 million to meet the country's immediate humanitarian needs through the Consolidated Appeal Process (CAP). This is an additional \$100 million above the initial \$378 million requested when the 2010 appeal was launched in December 2009. The increases are largely for agriculture, food aid and health-related projects.

Key priorities to be addressed by the revised 2010 CAP include improving levels of food security, prevention of and rapid response to disease outbreaks, protection-related issues and response to natural disasters. Food aid activities, initially scheduled until April 2010, were extended to December 2010 due to the protracted dry spell from mid-December 2009 to February 2010, which affected food security in parts of the country. Currently about 540,000 people require food aid, a figure expected to rise to 904,000 from October to December 2010 and subsequently 1.3 million at the peak of the hunger season from January to March 2011; 4.5 million people have limited or no access to safe water and sanitation in rural and urban areas; 1.6 million children require support to access education while there has been a marked decline in student enrolment at schools since 2006; and 15,000 severely malnourished children under 5 years are at very high risk of dying in Zimbabwe.

The fragility of Zimbabwe's humanitarian situation is largely because of the prevailing degradation of infrastructure in the basic sectors of health, water

and sanitation and food security. While some early recovery activities are ongoing as part of humanitarian actions, the lack of major funding for recovery and development remains a major hindrance to moving the country out of a situation of generalized humanitarian need.

The humanitarian response, through the CAP, contributed to saving lives by providing food to vulnerable populations and supporting vital social services including health and education at a critical point in Zimbabwe's history, despite funding challenges.

However, currently the 2010 CAP is only 41.6% funded. Lack of funding at this critical point threatens to reverse progress made between the latter part of 2009 and now. Support is desperately needed to avert loss of more lives and a further erosion of social infrastructure. Without sustained interventions Zimbabweans remain vulnerable to unforeseen emergencies as illustrated by recent multiple disease outbreaks such as cholera, malaria, measles and typhoid which resulted in preventable deaths.

The humanitarian community continues to appeal to donors for increased funding. On their part, humanitarian partners will continue to render assistance through instruments such as the CAP. All activities will be undertaken while ensuring humanitarian and Government priorities remain complementary in all sectors. In parallel, efforts should be made to address the root causes of resurging humanitarian needs through restoration of basic infrastructure and livelihood programmes. A concerted effort by all stakeholders, including the GoZ, donors and the humanitarian community, is essential in this regard.

## II. Humanitarian Needs and Response

### Health

In anticipation of a possible mass influx of Zimbabweans returning from South Africa following the 2010 FIFA World Cup in the neighbouring country, the health cluster strategic working group (SWG) recommended that needs assessments be conducted in Beitbridge and Plumtree border towns to appropriately inform an inter-agency contingency plan developed to assist returnees. The assessment was carried out by a joint team comprising the European Commission Humanitarian Aid Office (ECHO) and WHO. The major objective of the visit was to assess the level of preparedness to respond to mass return with a focus on health. The mission visited Beitbridge and had fruitful discussion and works sessions with the District Medical Officer (DMO) and key health partners operating at the border with South Africa, namely International Organization of Migration (IOM), Medecins Sans Frontieres (MSF) and World Vision International (WVI). Under the leadership of the DMO Beitbridge, the health cluster members are actively involved into the contingency planning process activities held at the office of the DMO. The Provincial Medical Director (PMD) and the DMO participate to the provincial Civil Protection Unit (CPU) activities including meetings, needs assessment, capacity assessments and planning among others.

The contingency plan for mass return was further discussed during the monthly health cluster meeting on 13 July. In addition, following consultation with cluster members, the SWG finalised the health component of the Inter-Agency contingency plan for 2011 being led by OCHA.

The national immunisation campaign conducted from 24 May to 2 June 2010 has started to bear fruits as the weekly number of new measles infections has declined. One considers that it normally takes two to four weeks for the measles jab to start fighting the measles attack. A cumulative 1,427 cases and seven deaths have been reported by 25 July in the period after the campaign. Altogether 31 blood specimens were received by the laboratory and 19 were confirmed to be measles IgM positive. Of the suspected cases, 229 were reported after the week ending 4 July when immunity is expected to have developed in vaccinated children. The MoHCW Epidemiological Bulletin indicates that the decline became noticeable around June 20. Prior to the

campaign 8,708 suspected cases and 517 deaths had been reported since the onset of the outbreak in September 2009.

The post National Immunisation Days (NID) and Child Health Days (CHD) campaign survey started this month. The data entry has been completed and the consultants started the analysis. Preliminary results are expected in the coming days. It is hoped that findings from the survey and lessons learnt from the campaign will enhance the routine Expanded Programme on Immunisation (EPI).

Meanwhile, integrated EPI disease surveillance and case finding continues. Districts have been encouraged to continue searching for suspected measles cases.

A resurgence of cholera has been reported, particularly in the Manicaland province where outbreaks have been largely associated with illegal diamond mining activities. By 25 July 2010 a cumulative 703 cases consisting of 604 suspected cases, 86 laboratory confirmed cases and 18 deaths had been reported since the onset of the current outbreak in February 2010. The crude case fatality rate is 2.6%. Over the same period last year 98,522 cumulative cases and 4,282 deaths with a crude case fatality rate of 4.3% had been reported in an outbreak that started in August 2008. Altogether 18 districts have been affected compared to 54 in the 2008/9 outbreak. The last reported cases were confined to Chimanimani district in Manicaland province and reported among illegal diamond miners from the Chiadzwa mining area. Most, 72% of the cases in the current outbreak are from rural areas compared to 67% during the corresponding period in 2009.

Cases of typhoid increased slightly to 458 by 25 July 2010 compared to 449 reported over the same period in June. The outbreak, which began in February this year, remains confined to Harare and its environs. The coordination of response activities continues at Harare City Health department. Surveillance, health promotion and case management continue and patients are being treated at Beatrice Road Infectious Diseases Hospital (BRIDH).

Sporadic cases of suspected meningococcal meningitis were reported from Harare City and Marondera district. Investigations conducted by the Mashonaland East PMD and Harare City Health did not confirm the suspicion of a meningococcal meningitis outbreak.

The situation is currently being monitored by the respective health authorities with support from health cluster members.

Vaccination against H1N1 is underway following the launch of the programme by deputy Health and Child Welfare minister, Dr. Douglas Mombeshora on 22 July 2010. The vaccination programme is targeting 1,250,000 people, primarily health workers, school children, pregnant women in the third trimester and chronically ill persons. Health cluster members were mobilised to support their respective districts and provinces to successfully conduct this exercise. The vaccination programme comes after Zimbabwe experienced 1,538 suspected, 253 probable and 41 confirmed cases of H1N1 between July and November 2009. The majority of these cases were among students in boarding schools.

### Water, Sanitation and Hygiene

Partners within the water, sanitation and hygiene (WASH) cluster continue to support the MoH&CW's response to the current cholera outbreak in Manicaland province. Organisations involved in the response include Mercy Corps, a member of the WASH emergency response unit (WERU), with financial support from the European Commission Humanitarian Aid Organisation (ECHO). To date, Mercy Corps has assessed and rehabilitated clinic water and sanitation services at Biriiri, Chiadzwa, Chakowa and Nyanyadzi clinics in Chimanimani district. The initiative is being complimented with community hygiene promotion activities. Mercy Corps distributed 250 hygiene non-food item (NFI) kits while the MoH&CW distributed 2,000 hygiene kits in Chiadzwa clinic catchment area. Water point rehabilitation was conducted in villages populated with illegal diamond miners, namely in Buhera and Mutare districts, to reduce the risk of transmission. Interventions by Mercy Corps complemented medical services supported by the MoH&CW and the International Rescue Committee (IRC).

A key priority in emergency preparedness remains the cluster's engagement in the planning process organised by the Department of Civil Protection (DCP) and OCHA to respond to a possible influx of Zimbabweans returning from neighbouring South Africa following the World Cup.

With respect to WASH needs, Action Contre La Faim (ACF) in Beitbridge conducted an assessment at receiving points identified by IOM and in collaboration with the district CPU. UNICEF and WVI provided support for the water and sanitation services including 4,500 hygiene NFI kits and 24 mobile toilets while Oxfam supported IOM's WASH assessment in Plumtree in preparation for possible influx at this border post. In Masvingo town, the district CPU identified possible shelters for displaced people.

The recently launched 2010 National Nutrition Survey indicates that 71.5% of children below 59 months of age live in households utilizing an improved water source. Rates varied between districts, 14 districts had coverage of less than 60%. Additionally, 54.8% of children in the same age group live in households utilizing improved sanitation facilities. Rates varied between districts and 15 districts had coverage of less than 40%. Currently, the National Co-ordination Unit (NCU) is undertaking an initiative to develop a detailed database of water and sanitation facilities throughout the country.

At its July monthly co-ordination meeting, the WASH cluster discussed the cholera response in Manicaland. Members noted the need to communicate with health officials from Mozambique on the on-going outbreak and highlight risks of transmission from mobile illegal diamond miners. The NCU has agreed to provide routine updates on the entire sector at WASH cluster meetings. The unit also advised of commemorations of sanitation week to be held in Matabeleland South province in Beitbridge under the 2010 theme "zero tolerance to open defecation"- a clean environment.

Co-ordination of emergency WASH interventions has been maintained at provincial level through meetings of the Chitungwiza, Harare, Manicaland, Masvingo, Matabeleland and Midlands sub-clusters. Within the month, a debut meeting of the Mashonaland Central sub-cluster was chaired by a representative of the Provincial Water and Sanitation Sub-Committee and supported by German Agro-Action (GAA). The meeting, attended by 45 representatives from different agencies and Government ministries, deliberated on the basics of humanitarian reform and how co-ordination will be maintained in the sub-

cluster, alongside co-ordination of humanitarian issues in the same geographical area. Terms of reference (ToR) are being drawn up to clarify the institutional set-up of the sub-cluster.

RedR UK delivered a new Training of Trainers (ToT) course for WASH professionals in Zimbabwe from 19 to 23 July as part of efforts to support the development skills and build capacity at local level ahead of the rainy season this October. The five-day training course delivered by RedR, in partnership with Zimbabwean Institute of Water and Sanitation Development (IWSD), sought to build local capacities and expertise in preparing for outbreaks in order to reduce the impact of cholera on communities.

### Agriculture

FAO has been compiling a database on seed and fertilizer assistance for the 2010/11 season and about 480,000 households have been targeted to date. Data is still being collected from NGOs and those that have not yet submitted information to FAO are urged to do so as soon as possible.

Data collected in July through the Agriculture and Food Security Monitoring System (AFSMS) in 198 sentinel sites across the country shows the food security is stable. Most households representing 56% of those surveyed, are consuming grain from own production. Maize grain prices have continued to remain stable. The average maize grain price across all sites is 30 cents per kilogram (Kg). In Beitbridge district in Matabeleland South the price of maize grain has consistently remained above the national average. In Gokwe South and Shurugwi districts in the Midlands province, which are high potential crop producing areas, the prices are lower at 24 cents and 27 cents per Kg respectively.

The Zimbabwe Vulnerability Assessment Committee (ZimVAC) is planning to produce quarterly food security updates during the course of this marketing year. The updates aim to effectively monitor developments in the food security situation and provide concise updates for key decisions makers in Government, donors and the broader humanitarian community.

The report of the FAO/WFP Crop and Food Security Assessment Mission (CFSAM) to Zimbabwe has been released. The CFSAM is conducted to verify the results announced by the Second Round Crop and Livestock Assessment. The findings of the CFSAM

mission concluded that the methodology implemented and the extensiveness of the Second Round Crop and Livestock assessment was reliable. It also concluded that the national cereal production estimates are reasonable and provide a good indication of the domestic availability of cereals in the country.

National maize production is estimated to be 1.35 million tonnes, representing a 7% increase over last year's harvest, with an average yield of 0.7 tonnes/Ha from 1.8 million Ha with approximately 1.2 million Ha from the communal sector. The improved harvest this year is on account of the large expansion by 20% in area under maize. Significant increases were also noted in the central and western provinces.

An inter-ministerial committee chaired by the Government has developed guidelines on the implementation of the National Small-Holder Agricultural Input Support Programme for the 2010/11 season. Finalization of the guidelines is still awaiting approval by Cabinet.

### Food

The 2010 ZimVAC rural households assessment report estimates that some 1.3 million rural people, approximately 15% of the rural population, will be food insecure during the peak hunger period between January and March 2011. The food needs for this food insecure population, that is the food entitlement gap, was estimated at 98,000MT.

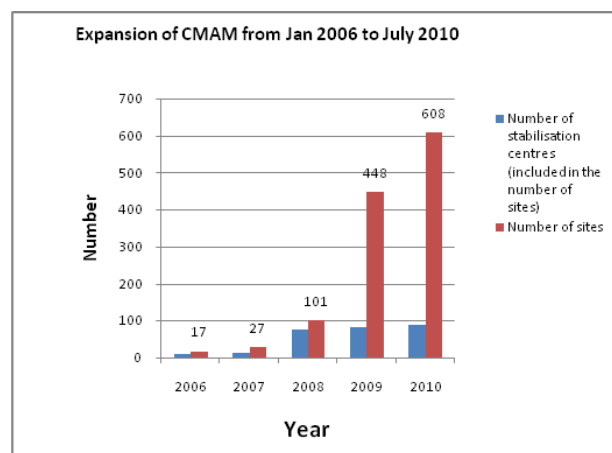
As at 30 July 2010, the WFP Safety Net (SN) programmes reached a total of 286,430 beneficiaries with 2,862 metric tonnes (MT) of food, equivalent to 78% of planned food delivery and 73% of planned beneficiaries.

Consultations are ongoing between the GoZ, WFP and donors regarding the "Government Food Deficit Mitigation Strategy through Public Works". A Market Baseline Assessment for the Harare Cash & Voucher programme has been conducted. The regional purchase initiative has gathered momentum. To date, a meeting with the short-listed local suppliers has been held, a contract for 3,528 MT has been signed and another tender has been launched.

### Nutrition

The Zimbabwe National Nutrition survey, which was conducted in January and the report launched on 9

July 2010 has revealed a high, persistent and deteriorating problem of chronic malnutrition. Chronic malnutrition remains unacceptably high at 33.8% for children between aged six to 59 months. In 24 out of 62 districts the stunting rates were above 35%. The report also showed extremely low and deteriorating trends in exclusive breast-feeding at only 5.8% for children under six months. Exclusive breastfeeding is the scientifically proven supreme practice to ensure survival, growth and development of children. The survey also showed that children living in rural areas are significantly more malnourished than those living in urban areas. Encouragingly, the survey showed that acute malnutrition had not reached national or international emergency thresholds. Senior Government officials and was taken as a call for action. Senior Government officials, including Prime Minister Morgan Tsvangirai, attended the launch. They noted that high levels of chronic malnutrition were among the major challenges towards the country's socio-economic development and pledged to keep undernutrition central to the social and economical development agenda.



Community Management of Acute Malnutrition (CMAM), which is partly funded by the Central Emergency Response Fund (CERF) has been expanded to 608 sites, representing 41% of all facilities in the country. The aim is to expand the service in every facility and adequately integrate with HIV testing and treatment services. This is because over 50% of children presenting with severe acute malnutrition are suspected to be HIV positive. The quality of the programme remains a challenge as highlighted by very high defaulter rates and border line death rates as compared to international

standards. Nutrition partners are working with the MoH&CW to improve quality.

### Logistics

The Logistics Working Group continues to provide support to partners. In July, WFP entered into partnership with the Global Fund against Tuberculosis AIDS and Malaria (GFTAM) for the provision of logistics services such as customs clearance, transportation, storage and distribution for commodities used in the prevention and treatment of the three diseases.

WFP has also renewed its agreement with GTZ on provision of the logistics services for the organisation's inputs programme. In addition to provision of storage, this year WFP will also undertake the transport of the inputs to the distribution points.

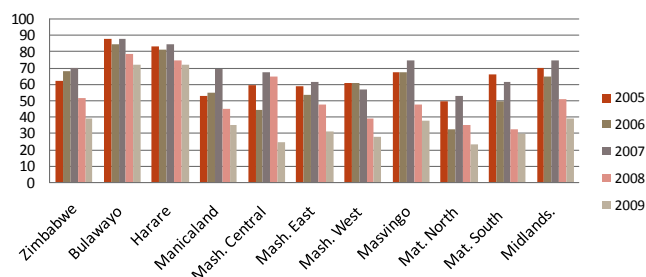
### Education

Zimbabwe's education sector is in a crisis due to a number of factors and various initiatives are being undertaken to improve the situation. A series of conferences were held in July to raise awareness on the most urgent issues facing the country's education sector. An initial conference took place in Harare from 12 to 13 July under the title: "Education in Zimbabwe: working together for a better future." This provided the basis for a second, larger conference that took place in London on 22 and 23 July with financial support from Link Community Development and the Open Society Institute of Southern Africa (OSISA). During the conferences, the Minister of Education, Sports, Art and Culture (MoESAC) Senator David Coltart presented some key findings that highlighted the crisis that the sector is in at present. Among these was a low pass rate, high staff turnover and a gradual decline in school enrolment.

Over the years, the grade 7 pass rate has fallen significantly with less than 40% of children showing they have the basic skills needed to progress to secondary school as illustrated in the figure below. Almost 25% of all primary school teachers do not meet the minimum qualification standards and the distribution of teachers is highly distorted, with some provinces having over 45% vacant posts.

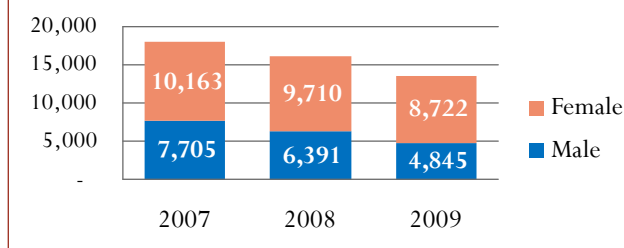


### Grade 7 Pass Rates 2006-9



The decline of the sector is further illustrated by an almost 30% decrease in teacher enrolment as illustrated in the figure below. Furthermore, the education sector is under-supervised and managed with a 25% decrease in supervision visits as 40% of district education officer (DEO) posts are vacant. Over and above this, the education sector is seriously under-funded with recurrent costs taking up 95% of the total budget leaving almost no scope for investing in improving the quality of the system. As such, the sector remains heavily dependent on international financial support.

### Teachers College Enrolment 2007 - 2009



In response to the prevailing situation, the MoESAC is developing an emergency education plan that will address fundamental issues in the sector. The plan, which is being developed with support from the Education Cluster, will in turn serve as input to the discussions on the 2011 national budget and the Medium Term Plan (MTP). Provincial level stakeholder consultations have taken place and five strategic areas for intervention have been identified. These include reforming the professional status of teachers; re-establishing minimum conditions of learning; improving the quality of learning; re-invigorating school and system governance; and focusing resources on those with greatest need. The first draft of the plan outline has been completed.

In another development, key partners, together with UNICEF, are developing an education in emergencies

network. This network will provide support to the MoESAC to better supervise, monitor and coordinate activities at the provincial, district and school level. Furthermore, provincial level warehousing capacity and emergency response abilities at the field level will be strengthened.

### Emergency Telecommunications

Agencies involved in the Emergency Telecommunications Cluster (ETC) have agreed to prepare the business continuity plan (BCP) before the next cluster meeting, so as to provide ample input to be used in formulating the overarching cluster plan.

In addition, plans are being made for UNDSS to conduct all-inclusive radio training during early August. ETC members have also highlighted the need for ToT workshop. Further, development of the WHO health radio communication network is underway and progressing well.

The Posts and Telecommunications Regulatory Authority of Zimbabwe (POTRAZ) has written to Ministry of Foreign Affairs (MoFA) after being informed of UN Agencies' exemption from paying licence fees. They are yet to get a response from the ministry on the way forward.

### Protection

Protection partners remain on high alert in case of an influx of Zimbabweans from South Africa. While concerns persist related to possible mass inflows to Zimbabwe due to violence following the 2010 FIFA World Cup in South Africa, there has not been any significant increase in such movements. However, outflows from Zimbabwe to South Africa continue to be larger than inflows and the response of South African authorities to incidents which have occurred appears to be robust and visible.

UN agency, NGO and Government actors continue to monitor the situation and remain prepared to fully activate the detailed joint contingency plans emphasizing support for unaccompanied children and other vulnerable groups should the need arise. Cooperation and coordination have been very positive and existing resources in key border areas remain able to respond to the current situation. Numerous meetings, including a workshop in Beitbridge to address aspects of the contingency plan related to unaccompanied children and cross-border

planning meeting held in South Africa's border town of Musina, have enhanced coordination, implementation and monitoring.

No new internal displacements have been reported for the month, although there continue to be a few legal actions related to farm evictions.

Progress is reported in seeking durable solutions for the displaced population in Gwenzi, as some 200 families have agreed to be relocated. IOM, UN agencies and NGOs are exploring options for providing assistance to enhance sustainability of the move including, for example, the drilling of boreholes. A two-week long civil status documentation exercise organized by UNHCR has also been completed for members of the Gwenzi displaced community, as well as host community members, in close cooperation with the Registrar General. Some 350 families have received over 650 birth certificates and/or national identity cards, ensuring their access to essential national services in addition to addressing questions of potential statelessness. UNHCR provided documentation fees, transportation and screening support to the Registrar General's office, in what is hoped to be a model of cooperation for further large-scale documentation efforts.

IOM donated sporting equipment comprising volley balls, netballs and soccer balls to displaced communities and their hosts in eight wards in Murehwa district. The equipment is meant for community sporting tournaments aimed at achieving reconciliation at grassroots level, promoting peace through social interaction. A variety of promotional materials containing peace messages including T-shirts, hats, bags, calendars and pamphlets were distributed. Murehwa district authorities welcomed this initiative and called for a greater coverage in other wards of the district.

UNFPA and UNICEF supported the Ministry of Women Affairs, Gender and Community Development (MoWAGCD) to organize a three-day planning meeting on gender based violence (GBV) in Nyanga from 12 to 14 July 2010. Participants were drawn from civil society organizations (CSO), UN agencies and various Government ministries, including MoESAC, MoH&CW, Home Affairs (MoHA), and Justice and Legal Affairs. MoWAGCD Permanent Secretary, Dr. Slivia Utete-Masango officially opened the workshop. In her remarks, she emphasized the need for an integrated approach in order to reduce

GBV and commended efforts by CSOs, UN agencies and key Government ministries to date. The workshop centered on GBV programming, including prevention, service provision, assessment, advocacy and coordination. The need for more safe-spaces was highlighted and participants agreed to consolidate the GBV Strategy and Action Plan. They also agreed to share the National GBV Strategy with donors, as well as to organize sessions on GBV in Humanitarian Settings and Protection from Sexual Exploitation and Abuse (PSEA).

The possible mass influx of unaccompanied and separated children after the FIFA World Cup is beyond the capacity of the current system. Therefore joint contingency planning for unaccompanied and separated children around FIFA World Cup was initiated by the Department of Social Services (DSS) with technical support from UNICEF since May 2009. Various Government officials from relevant ministries, UN agencies and civil societies have actively participated in the process and Taskforce to coordinate the process and emergency was established. The taskforce is chaired by DSS with support from UNICEF. The members include, IOM, UNHCR, the Protection Cluster, Save the Children Norway, Child Protection Society, International Confederation of Red Cross and Red Crescent Societies (ICRC) and Zimbabwe Red Cross Society (ZRCs). The taskforce conducted shelter and capacity assessment of actors and developed the joint contingency plan. All districts have formed a core group to coordinate the joint contingency plan at district level.

In preparation for the participative review of the National Action Plan (NAP) for Orphans and Vulnerable Children (OVC) for 2004 to 2010, a series of focus group discussions (FGD) were completed with boys and girls in urban and rural areas of Zimbabwe using existing partnerships with Programme of Support Implementing NGOs. Participants included children that are out-of-school, those living in residential care institutions and those with disabilities. Children identified the most vulnerable amongst them and reported on what they thought duty bearers should do. Through the consultation, children said they were concerned with their access to basic social services, particularly education and health, but also wanted access to justice especially when they had been affected by sexual abuse and violence at home. They also indicated that they wanted to have safe places to play.

The outcomes of these consultations were presented at two workshops in July 2010. First, at a two-day working group with Government on review and re-design of the NAP for OVC at which MoESAC, MoH&CW, MoHA and the Ministry of Labour and Social Services (MoL&SS), together with the National Aids Council (NAC) were represented and later at the Programme of Support Implementing Partners Quarterly Meeting. Thus the information was shared with more than 80 advocates and will form part of the evidence base for strategic planning for future service provision to OVC.

In view of the current constitution-making process, it has been noted that the current constitution does not have explicit provisions which are committed to the protection of children's rights. Children's rights are bundled together with adults' rights. UNICEF is supporting the inclusion of children's views and rights in the on-going constitution-making process, in a partnership initiative involving the Ministry of Constitutional and Parliamentary Affairs and the NGOs Africa Community Publishing and Documentation Trust (ACPD), Childline and Justice for Children Trust (JCT).

To date 20 district consultations have been conducted and altogether 3,990 children have contributed to the process. Issues that are emerging include protection from sexual abuse and violence, particularly against girls; education challenges such as unaffordable schools fees and uniforms, coupled with unequal access and the impact of election periods on access to schools; lack of birth registration; corporal punishment; child labour and inadequate opportunities for play; water and sanitation issues such as access and quality; and limited access to essential services including health and welfare. Children also identified that many of their peers do not have sufficient opportunities to influence or participate in decision-making, for example, children with disabilities or those out of school or those living with HIV. The next step is to have a Children's Summit on the Constitution for Child Parliamentarians, presenting the views of children to the Parliamentary Select Committee on the Constitution (COPAC) including a written report and presentations by children. UNICEF and partners will continue to lobby and advocate for the inclusion of children's rights during the drafting process of the constitution.

Despite some claims of violence and/or intimidation in the context of the Constitutional "outreach" process, there appear to have been no resulting displacements.

### Multi-Sector

UNHCR attended the Zimbabwe Refugee Committee session from 13 to 15 July 2010. In this session, 103 cases were scheduled for interview and 96 applicants were present. Of the 96 cases assessed, 71 cases were granted refugee status, 22 had their applications deferred for state security to verify claims and three were cases for automatic activation. No cases were rejected.

Two community-based counter-trafficking workshops were conducted in Odzi and Mutanda communities located in Mutare Rural district, in Manicaland province between 5 and 6 July 2010. The workshops aimed at strengthening community involvement in preventing human trafficking as well as protecting and referring identified victims of trafficking for further assistance. A total of 104 participants drawn from traditional and church leadership, out of school youth, community child protection committees and teachers attended the two workshops. In addition, a one-day refresher workshop for social services providers in Mutare was conducted on 7 July 2010. The workshop aimed at strengthening networking, coordination and referral systems within Manicaland province as part of scaling up anti-trafficking prevention efforts and protection of identified trafficking victims. Challenges and possible recommendations in strengthening anti-trafficking initiatives were also shared among the participants. Altogether 25 stakeholders attended the workshop with participants drawn from NGOs, DSS, MoH&CW, MoWAGCD, the ministries of Youth Development, Indigenisation and Empowerment as well as Justice and Legal Affairs, together with the Zimbabwe Republic Police (ZRP) Victim Friendly Unit (VFU).

Child trafficking post-workshops monitoring visits targeting trained primary and secondary schools in Manicaland, Matabeleland North and Midlands provinces were conducted. The monitoring visits aimed at reviewing progress towards implementation of anti-child trafficking prevention strategies adopted by teachers and students during the initial anti-trafficking workshops conducted between February and March 2010. With the support of trained



teachers, children and students in schools visited managed to set up anti-trafficking school clubs to coordinate anti-trafficking activities at school level. Some of the activities conducted in visited schools include; drama, writing of poems, conducting quiz and talk shows with key messages centred on child trafficking and safe migration. In total 35 schools were visited and more anti-trafficking information, education and communication (IEC) materials in the form of safe migration comic booklets, posters, T-shirts with key child friendly messages were distributed as part of the on-going information awareness raising programme. The school visits were conducted in partnership with representatives from MoESAC and Childline Zimbabwe.

### III. Funding

Zimbabwe's CAP increased to \$478 million at mid-year, largely because of changes in agriculture, food and health needs. Currently, it is 41.6% funded, which is far below the 50% that would ideally be expected at this time of the year.

*All humanitarian partners including donors and recipient agencies are encouraged to inform FTS of cash and in-kind contributions by sending an email to: [fts@reliefweb.int](mailto:fts@reliefweb.int).*

### IV. Coordination

Key meetings scheduled for July 2010 are as follows:

- Wednesday, 4 August 2010  
Protection Cluster Meeting. UNICEF. 11:30am.  
Contact: [trotterp@unhcr.org](mailto:trotterp@unhcr.org)
- Thursday, 5 August 2010

LICI Cluster Meeting. UNDP. 02:00pm.  
Contact: [kirstine.primdal@undp.org](mailto:kirstine.primdal@undp.org)

- Friday, 6 August 2010  
Nutrition cluster meeting. UNICEF. 09:00am.  
Contact: [tstillman@unicef.org](mailto:tstillman@unicef.org)

- Thursday, 11 August 2010  
Education Cluster Meeting. UNICEF. 11:00am.  
Contact: [lmvono@unicef.org](mailto:lmvono@unicef.org)

- Wednesday, 18 August 2010  
Logistics Working Group Meeting. WFP.  
11:00am. Contact: [vladimir.jovcev@wfp.org](mailto:vladimir.jovcev@wfp.org)

- Tuesday, 17 August 2010  
Health Cluster Meeting. WHO Boardroom at Parirenyatwa Hospital. 02:30pm. Contact: [bonkougoub@zw.afro.who.int](mailto:bonkougoub@zw.afro.who.int)

- Thursday, 19 August 2010  
Emergency Telecommunications Cluster Meeting. WFP. 10:00am. Contact: [solomon.misgna@wfp.org](mailto:solomon.misgna@wfp.org)

- Wednesday, 19 August 2010  
Food Assistance Working Group Meeting. WFP. 10:00am. Contact: [liljana.jovceva@wfp.org](mailto:liljana.jovceva@wfp.org)

- Thursday, 26 August 2010  
Agriculture Coordination Working Group Meeting. Celebration Centre, 162 Swan Drive, Borrowdale, Harare. 09:00am.  
Contact: [constance.oka@fao.org](mailto:constance.oka@fao.org)

- Friday, 27 August 2010  
WASH Cluster Meeting. UNICEF. 09:00am.  
Contact: [bmurima@oxfam.org.uk](mailto:bmurima@oxfam.org.uk)

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## Cluster/Sector Membership List, July 2010<sup>1</sup>

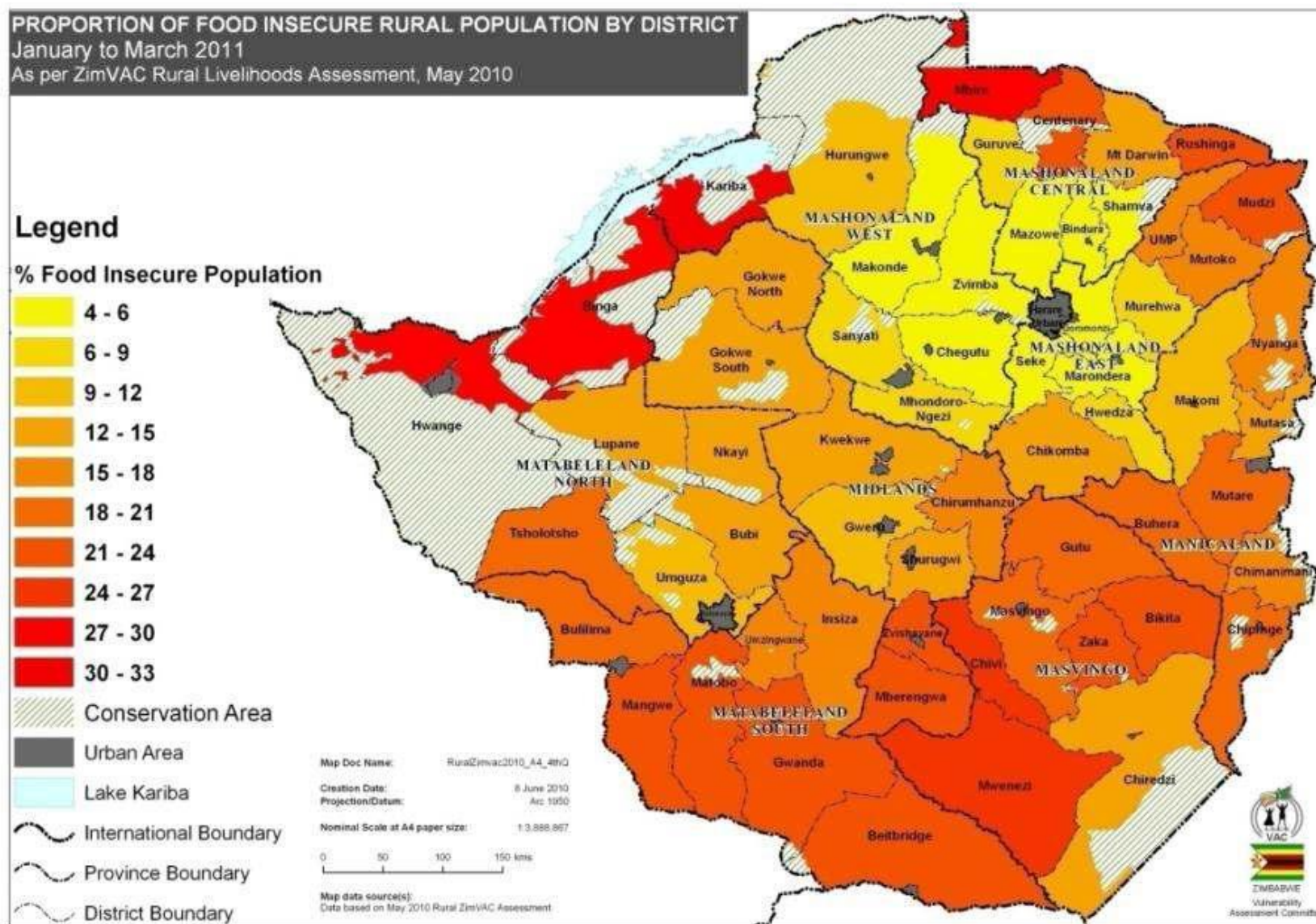
COORDINATION – OCHA: CONTACT Marcel Vaessen : <a href="mailto:vaessen@un.org">vaessen@un.org</a>									
Agriculture	Economic Livelihoods, Infrastructure and Institutional Capacity Building	Education	Emergency Telecommunications	Food Aid	Health	Logistics	Nutrition	Protection	WASH
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ACF, Action Aid, ACHM, ACTED, ADRA, Africa 2000, Africare, AGRITEX CADS, CAFOD, CARE, Christian Care, Concern, Cordaid, CSO, CRS, CTDT, Dabane Trust, DAPP, DVS, Environment Africa, FACHIG, FCTZ, GAA, GRM, GOAL, HELP, Help Age, ICRAF, ICRISAT, IFRC, IOM, LEAD Trust, Mercy Corps, MoAMID, MTLC, ORAP, OXFAM America, Oxfam GB, PENYA Trust, Plan, Practical Action, PSDC, River of Life, SAFIRE, SAT, SC-UK, SIDA, SIRDC, SPWSNET, Solidarités, USAID, UZ, WFP, WFT, WVI, ZCDT, ZFU, ZRCS	ADRA, CARE, Christian Aid, Christian Care, CRS, FABAZIM, FAO, GOAL, IFRC, IOM, LDS, MTLC, NHF, NPA, NRC, Oxfam GB, Progressio, SCN, UNAIDS, UNDP, UNFPA, UNHABITAT, UNHCR, UNICEF, WFP, WHO, ZPT	Africare, CARE, CFU, Chiedza, CRS, FAO, FAWEZ, GCN, IOM, Mercy Corps, MOESC, NHF, NRC, PLAN, SCN, SCUUK, SNV, SOS, TDH, UNESCO, UNHCR, UNICEF, WFP, WVI, ZIMTA	CARE, FAO, HIVOS, ICRC, ILO, IOM, Oxfam, Save the Children, UNICEF, UNDP, UNDSS, UNESCO, UNFPA, UNHCR, WFP, WHO, World Bank, World Vision,	ADRA, Africare, CARE, COSV, CRS, Christian Care, Concern, GOAL, HAZ, ICRC, IOM, IPA, Mashambanzou Care Trust, NRC, ORAP, Oxfam-GB, Plan International, SC-UK, WVI	ACF, ADRA, Africare, Action Aid, CARE Zimbabwe, CDC CH, CRS, CWW DAPP, Elizabeth Glaser Pediatric AIDS Foundation, Merlin, GOAL Humedica, ICRC, IFRC, IMC, IOM, MSF (Belgium, Holland and Spain), MDM, Plan International, Sysmed, International Red Cross Societies (Japanese, Spanish, Zimbabwe) UNFPA, UNICEF WHO, WVI	ACF, Concern, GOAL, IFRC, MDM, NCM, SC-UK, UNICEF, WFP	ACF, Action Aid, ACTION, ADRA, AFRICARE, Batsirai, CAFOD, CARE, CESVI, CFU, Christian CARE, CONCERN, COSV, CRS, C-SAFE, CTAZIM, ACHICARE, FACT, FAO, FCTZ, FNC, FOST, GAA, GOAL, GTZ, HELPAGE, HKI, IPA, LINKAGE, MDM, MERCYCORPS, MoHCW, MSF-B, MSF-H, MSF-L, MSF-Spain, MTLC, NHFZ, Nutrigain Trust, OXFAM, PLAN, SAFIRE, SC-N, SC-UK, SIRDC, TDH, Tree Africa, UNICEF, WFP, WHO, WVI, ZAPSO, ZCCIP, ZRCS, Zvitambo, ZWBTC	Cadec Care, Childline, Christian Care, CRS, Helpage, ICRC <sup>2</sup> , IOM, IRC, ISL, Mercy Corps, MSF-H, Musasa project, NRC, OCHA, OHCHR, OXFAM GB, Plan International, SCN, SCUUK, Transparency International, UNDP, UNFPA, UNHCR, UNICEF, WVI, WHO, ZACRO, ZCDT, ZYWNP	ACF, Action Aid, ADRA, Africare, ARUP, Ayani, CAFOD, CDC, Christian Aid, Christian Care, Concern, CRS, Dabane, FAO, FCTZ, GAA, GOAL, Help Age, Help Germany, IDEZIM, ICRC, IFRC, IOM, IRC, IWSD, JRC, Lead Trust, Mercy Corps, MSF-A, MSF-B, MSF-L, MSF-S, MTLC, NCA, OXFAM, Padare, Plan, Practical Action, PSI, Pump Aid, SC-UK, Solidarités, UNDP, UNHCR, UNICEF, UZ, WFP, WHO, WVI, WWF, ZCDT, ZINWA

<sup>1</sup> Please note that this matrix is constantly being updated. Kindly send the names of new member organisations and/or any proposed changes to OCHA.

<sup>2</sup> The ICRC, as a strictly independent humanitarian organisation participates as a standing invitee in cluster meetings to complement and strengthen the coordination for an efficient and effective humanitarian response.

*The mission of the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) is to mobilize and coordinate effective and principled humanitarian action in partnership with national and international actors.*

## Food Security Map for January to March 2011<sup>3</sup>



<sup>3</sup> Map courtesy of the ZimVAC.

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